

BP-A325.050_Release of Immigration Detainee With Supervision to Follow

**RELEASE OF IMMIGRATION DETAINEE
WITH SUPERVISION TO FOLLOW**

**U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF PRISONS**

INSTRUCTIONS

1. This form is completed only on inmates with INS Detainers who also are being released with supervision to follow (i.e., Parole, Mandatory Release, Mandatory Parole, Probation, or Special Parole Term). Bureau of Prisons Unit Staff are to complete all of Section A. except item 14, which is completed by Inmate Systems Staff upon remanding inmate to INS authorities.
2. SECTION B. is to be completed by U.S. Immigration and Naturalization staff and copies mailed to both the U.S. Parole Commission and U.S. Probation Office if the Detainee is released to the United States with Parole, Mandatory Release, or Special Parole Term supervision remaining.
3. If the Detainee has only Probation supervision or supervised release remaining, a copy is mailed only to the Probation Office. The U.S. Parole Commission does not require a copy.
4. INSTRUCTION TO INS OFFICER RELEASING DETAINEE: Each detainee released to the United States with any type of supervision is to be advised that he or she is responsible for reporting to the nearest U.S. Probation Office within 72 hours of release from INS custody. The detainee is to be given a copy of this form.

SECTION A. (SEE INSTRUCTIONS)

1. Institution and Address/CPM Office			2. Date	
3. Inmate's Last Name, First Middle		4. Register Number	5. INS Number	6. FBI Number
7. Case Manager's/CPM's Name		7a. Case Manager's/CPM's Signature		7b. Case Manager's/CPM's Phone (FTS)
8. U.S. Parole Commission Regional Office (Address)			9. U.S. Probation Office (District of Conviction & Address)	
8a. ATTN: (Analyst)	8b. Phone: (FTS)	9a. ATTN: (CUSPO)	9b. Phone: (FTS)	
10. Type of Release (Check one): <input type="checkbox"/> Parole Date _____ <input type="checkbox"/> Good Conduct Release <input type="checkbox"/> Mandatory Release Date _____ (Attach Notice of Action copy and Parole Certificate.) (Attach copy Mandatory Release Certificate.)				
11. Is there a Special Parole Term to follow? <input type="checkbox"/> No <input type="checkbox"/> Yes (Certificate attached) Length of SPT: _____		Is there a Supervised Release Term to follow? <input type="checkbox"/> No <input type="checkbox"/> Yes Length of Term: _____		
12. Is there a Special Parole Term to follow Incarceration? <input type="checkbox"/> No <input type="checkbox"/> Yes Length of Probation: _____		13. Full Term Expiration Date: _____		
14. Date of Release to INS Custody and Signature of Legal Tech: Date _____ Signature _____				

SECTION B. (This Section to be completed by INS)

15. <input type="checkbox"/> Subject was released from INS Custody on Bond/Recognize on date of _____	
15a. Detainee's U.S. ADDRESS: _____	
16. <input type="checkbox"/> Subject was removed from the United States on Date of: _____	17. <input type="checkbox"/> Other (Specify, i.e., died, etc.) _____
18. Signature and Title of INS Officer	Office Location
Date	